

STATE OF NEW HAMPSHIRE 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 1 7 2019

NEW HAMPSHIRE

II. Name of lobbyist's partnership, firm or corporation, if any: Adapt Pharma, Inc. (Name of partnership, firm or corporation) C/O Politicom Law LLP, 28 Liberty Ship Way, Suite 2815, Sausalito, CA 94965 Business Address: (Street) (TowoCity) (State) (Zip Code) (415) 903-2800 (415) 610-7604 e-mail reporting@politicomlaw.com (Politicom Code) (Politicom Code) (Politicom Code) (1415) 610-7604 e-mail reporting@politicomlaw.com (Politicom Code) (Politicom Code) (Politicom Code) (Politicom Code) (Pol	I. Name of Lobbyist(s)	Leahy			DEPARTMENT OF STATE
(Name of partnership, firm or corporation) c/o Politicom Law LLP, 28 Liberty Ship Way, Suite 2815, Sausalito, CA 94965 Business Address: (Street) (Town/City) (State) (Zip Code) (415) 903-2800 (415) 610-7604 e-mail reporting@politicomlaw.com (Telephone) (415) 610-7604 e-mail reporting@politicomlaw.com (Telephone) (Har) 610-7604 e-mail reporting@politicomlaw.com (Pall This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: Adapt Pharma, Inc. (Full Name of Client as it appears on the Lobbyist Registration Form) OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. 1V. Date of Report April 24, 2019 Activity from 40/1/19 to 630/19 October 30, 2019 Activity from 10/1/19 to 630/19 Activity from 10/1/19 to 12/31/19 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and Small should be a supplementable to	II. Name of lobbyist's partne	rship, firm or corporation, if a	ny:		
C/O Politicom Law LLP, 28 Liberty Ship Way, Suite 2815, Sausalito, CA 94965 Dusiness Address: (Street)	Adapt Pharma, Inc.				
Business Address: (Street) (Town/City) (State) (Zip Code) (415) 903-2800 (415) 610-7604 e-mail reporting@politicomlaw.com (Pax) III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: Adapt Pharma, Inc. (Full Name of Client as it appears on the Lobbyist Registration Form) OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 24, 2019 Reports cover: activity from date of registration to 3/31/19 activity from 41/19 to 6/30/19 October 30, 2019 Activity from 71/19 to 9/30/19 activity from 10/1/19 to 12/31/19 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03/301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A - Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B - Report of Honorariums or Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C - Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and Amplete to the best of my knowledge and belief.	(Name of partr	ership, firm or corporation)			
Business Address: (Street) (Town/City) (State) (Zip Code) (415) 903-2800 (415) 610-7604 e-mail reporting@politicomlaw.com (Pax) III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: Adapt Pharma, Inc. (Full Name of Client as it appears on the Lobbyist Registration Form) OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 24, 2019 Reports cover: activity from date of registration to 3/31/19 activity from 41/19 to 6/30/19 October 30, 2019 Activity from 71/19 to 9/30/19 activity from 10/1/19 to 12/31/19 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03/301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A - Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B - Report of Honorariums or Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C - Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and Amplete to the best of my knowledge and belief.	c/o Politicom Law LLP,	28 Liberty Ship Way, St	uite 2815. Sai	usalito. C <i>A</i>	A 94965
III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). Adapt Pharma, Inc. (Full Name of Client as it appears on the Lobbyist Registration Form) OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 24, 2019 Reports cover: activity from date of registration to 3/31/19 activity from 4/1/19 to 6/30/19 October 30, 2019 January 29, 2020 Janua		(Town/City)	··		
All reportable transactions occurring in the months prior to the reporting date relative to the following client: Adapt Pharma, Inc. (Full Name of Client as it appears on the Lobbyist Registration Form) OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 24, 2019 Reports cover: activity from date of registration to 3/31/19 activity from 4/1/19 to 6/30/19 October 30, 2019 January 29, 2020 January 29, 2020 January 29, 2020 January 29, 2020 Activity from 10/1/19 to 12/31/19 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A—Fees and Expenses If you have received fees or made expenditures, you must file Addendum B—Report of Honorariums or Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C—Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and simplete to the best of my knowledge and belief.	HIV	(415) 610-7604 (Fax	e-ma	il reportin	g@politicomlaw.com
Adapt Pharma, Inc. (Full Name of Client as it appears on the Lobbyist Registration Form) OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 24, 2019 October 30, 2019 October 30, 2019 January 29, 2020 activity from 10/1/19 to 9/30/19 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and Samplete to the best of my knowledge and belief.	III. This statement covers: (Creportable expense transaction	hoose one – file separate repo ns which are not attributable	rts for each clien to any one client	t, OR you m).	ay file a separate report for
OR □ All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 24, 2019 □ July 31, 2019 □ activity from date of registration to 3/31/19 activity from 4/1/19 to 6/30/19 October 30, 2019 □ January 29, 2020 □ activity from 7/1/19 to 9/30/19 activity from 10/1/19 to 12/31/19 V. There have been no fees received and no reportable transactions made since the last report. □ If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: □ If you have received fees or made expenditures, you must file Addendum A— Fees and Expenses □ If you have paid an honorarium or reimbursed expenses, you must file Addendum B— Report of Honorariums or Expense Reimbursement □ If you, your firm, or your family has made political contributions, you must file Addendum C— Political Contributions Sworn Statement/Affirmation by Lobbyist 1 have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and Amplete to the best of my knowledge and belief. □ Use 1 for the secretary of the post of my knowledge and belief. □ Use 1 for the post of my knowledge and belief. □ Use 1 for the post of my knowledge and belief. □ Use 1 for the post of my knowledge and belief. □ Use 1 for the post of my knowledge and belief. □ Use 1 for the post of my knowledge and belief. □ Use 1 for the post of the post of my knowledge and belief. □ Use 1 for the post of my knowledge and belief. □ Use 1 for the post of the post of my knowledge and belief. □ Use 1 for the post of	★ All reportable transactions	occurring in the months prior to	the reporting date	relative to the	he following client:
OR	Adapt Pharma, Inc.				
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 24, 2019		me of Client as it appears on the Lo	bbyist Registration	Form)	
Reports cover: activity from date of registration to 3/31/19 October 30, 2019	All reportable transactions b		obyist's family), c	r the lobbyin	g firm listed below which are
V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and simplete to the best of my knowledge and belief.	· •	•	• .)
If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and implete to the best of my knowledge and belief.		•	•	•	1/19
If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and implete to the best of my knowledge and belief.	If this box is checked, complete				
☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B— Report of Honorariums or Expense Reimbursement ☐ If you, your firm, or your family has made political contributions, you must file Addendum C— Political Contributions Sworn Statement/Affirmation by Lobbyist ☐ have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and implete to the best of my knowledge and belief. ☐ ### ### ###########################	VI. Check if additional repor	ts are attached:			
Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C— Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and implete to the best of my knowledge and belief. Hulf	If you have received fees o	r made expenditures, you must	file Addendum A	- Fees and E	Expenses
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and implete to the best of my knowledge and belief. Y LUG	•	rium or reimbursed expenses, yo	ou must file Adde	endum B Re	eport of Honorariums or
I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and implete to the best of my knowledge and belief. Y [U G	☐ If you, your firm, or your f	amily has made political contrib	utions, you must	file Addend	um C- Political Contributions
(Signature of lobbyist) Ed Leahy (Print Name of lobbyist)	I have read RSA 15, RSA 15-B and implete to the best of my (Signature of lobbyist) Ed Leahy	, RSA 14-C and RSA 664 and h	ncreby swear or a	firm that the	foregoing information is true

LEASE PRINT

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Ed Leahy				
II. Name of lobbyist's partnership, firm or corporation, if any:				
(Name of partnership, firm or corporation)				
III. Name of Client Adapt Pharma, Inc.	Date			
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, governmen including research, monitoring legislation, and related legal work. The gr reduced by any expenses:	t relations, or public relations service			
a) Total of all fees received in this reporting period	a) § 2,153.76			
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y	b) \$ <u>0.00</u>			
c) Total of all fees received to date (Add lines a and b)	c) \$ 2,153.76			
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ 0.00			
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office e individual expenses where the expenditure was of \$25.00 or less (for examplunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paid xpenses; (b) the aggregate total of alle: meals purchased during a businesses than \$10 that is given to the personed with a value of \$25.00 or less); and orting period of greater than \$25.00 four of greater than \$25.00 four of greater than \$25, purchase of a ger than \$25, but not greater than \$50, expense reimbursement, or politica			
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 0.00			
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ 0.00			
c) Total of all itemized expenditures reported in detail in section VI.	_{c)} \$ 0.00			

d) Total expenses for this reporting period	d) \$ 0.00			
(Add lines a, b and c)				
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>0.00</u>			
f) Total of all expenses year to date	f) \$ 0.00			
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting			
Paid to:	Amount:			
<u>N/A</u>	s <u>0.00</u>			
	\$			
	\$			
·	\$			
	\$			
	\$			
	•			
	·			
Sworn Statement/Affirmation by Lobbyist				
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.				
(Signature of lobbyist)	4/10/19			
	(Date)			
Ed Leahy (Print Name of lobbyist)				
(1 Time (Tablio Of 1000) 15()	•			